IJ <b>.</b> S		Cost Reimbursabl	or establishment)			-	PA:	ID BY	
Jourher men	ared at	, <u>-</u>					APC	lai	
oucher prepared at(Give place and date)						F E _	OPY /	05 7	
HE UNITED S	STATES, Dr.,	Payee's A	Account No5	.(У			01 1,	UF 5	4
Го		(Payee				-		•	
•						_			
		dress)	(City)	(State)		LINIT'	PRICE	AMOUNT	
No. and Date of Order	Date of Delivery or Service	(Enter description, item schedule, and other Discount Terms	number of contract or r information deemed	r Federal supply necessary)	QUANTITY	Cost	Per	Dollars	Cts.
		Cost						13,675.	13
	-				,				
AYMENT:									
Complete									
Partial		Ilse continu	uation sheet(s) if necessa	arv					
hipped from		to Weig		overnment B/L No			Total	13,675.	13
	above bill is correc	ct and just and that payment	has not been received.		ayee must NO				
STATI	INITI	(Sign original only)		Differ	rences				
		STATIN	NTL					-	
Date 11/14/5	5 *Pavee	not require		A1	mount verified:	correct fo	·	13,675	13
Pe		1			ignature or init	ials)	<u> </u>		
Contract No.	Alol	Date	Req. No.		Date	<u>ν</u>	Invoice Rec	'd.	
Pursuant to suthe	ority vested in me,	I certify that this account is	correct and proper for I	payment.		/:	2/0/	∠_ ST	ΑT
Approved for \$	13.675	.13		†	(A/u/hori	zed Certify	ing Officer)	<u> </u>	
		2/5/55-	SIGN ORIGINAL	Title Author	rized Ce	rtifyi	ng Ofi	ficer	
Ву		ST	ONLY ATINTI						
litleCo1	ntracting (	Officer		Date	TUOUT WOITTEN	ACDEEMENT	IN ANY FORM		
		THIS FORM MUST BE EXECUTED WHEN						" 	
	ACCOL	UNTING CLASSIFICATION (	Appropriation Symbol	must be shown;	other classifica	tion optio	nal)		
ΔΡΡΊ	ROVED:								
THE RES									
			STATI	NTL					
	Approving	Officer							
	-Phase								
		·							
	No	dated	, 19, fo <b>r</b>	· \$				the United Stan	tes in

## Standard Form No. 1035—Revised Form prescribed by Comptroller Gene Sprintized September 7, 1000 No. 11) Services Other Than Personal

CONTINUATION SHEET

	Date of	ARTICLES OR SERVICES	OHAN	UNIT PRICE		AMOUNT	
No. and Date of Order	Delivery or Service	(Enter description, item number of contract or Federal supply schedule and other information deemed necessary)	QUAN-	Cost	Per	Dollars	Cı
		PAYROLL SYSTEM III					
		Direct Labor Costs properly chargeable to Contract AlOl for the period 10-31-55 thru 11-6-55	50			STATIN	111
		Week Ending 11-6-55 ST	ATINTL				
STATINT	-	Overhead computed at interim rate of					
		Total Labor and Overhead				13,558.	'
		OTHER COSTS					
# P.O.#	CK #	NAME					
11704 10014	14297 14375	Atomic Instrument Basic Tool		36. 80.	00 ·/ 40 ·/	7	
		Total Other Costs				116.	
		Total Labor, Overhead and Other Costs			=	13,675.	_
	·						
					:		
			:				



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## ATOMIC INSTRUMENT COMPANY

NUCLEAR MEASUREMENT APPARATUS • MANUFACTURERS • CONSULTANTS

ELECTRONIC COUNTING & CONTROL EQUIPMENT = 

84 MASSACHUSETTS AVENUE CAMBRIDGE 39, MASS. U. 3. 6

11653 INVOICE NO. RAMO WOOLDRIGGE CORPORATION SOLD 8820 BELLANCA DATE SHIPPED 10/26/55 LOS ANGELES 45, CALIFORNIA TO INVOICE DATE **TERMS NET 10 DAYS** F. O. B. CAMBRIDGE, MASS. SAME SHIP 5651 WEST 96TH STREET TO LOS ANGELES 45, CALIFORNIA STATINTL SALESMAN YOUR P.O. NO. DATE ORDER REC'D. **DELIVERY DATE** 11 704 10/20/55 10/27/55 SHIPPING INSTRUCTIONS B/L NO. 295222 R.R. EXP. THE P. P. P. T. THE AIR P P SPECIAL DELIVERY TRUCK PREPAID COLLECT R.R. EXP. SHIPPED UNITS BAL. ON MATERIAL AND SPECIFICATIONS UNIT PRICE TOTAL TODAY ORDERED ORDER 2 TYPE GC10P DEKATRON TUBES 2 17.50 0 35.00 1.00 **POSTAGE** 36.00 APPROVED FOR FA. MENT Sanitized - Approved For Release: CIA-RDP64-00360R000400060007-5

Sa Sa	nitized - A	pprov	ECE	RUMES: REPORT-00360R00040  Next Co DATE 10-28-	(000000 کور سرسر	7-5 <b>~</b>
ENDOR C	tomic	Jus	trus	nent Co DATE 10-28	55 (Reg. 16	: Un:
HIPPER	<u> </u>	00	4		· lugire	,,,,,
C'D VIA	air	P.P.	<del></del>	FREIGHT BLL NO.	100	<u>,                                     </u>
ACKING SLIP	NO	mo	w	MOP OF CONTAINER		
		QUAN	TITY	DESCRIPTION	WEIGHT NET GR	
QUANTITY RECEIVED	PART NO.	ACC.	REJ.		NET	98
2				GC10 P Dekatron		<b> </b>
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						<del> </del>
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STATINIL				CCC 25-20-55	SIAIII	41L
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ommu		· · · · · · · · · · · · · · · · · · ·				

Sanitized - APPROVED FOR SANITIZED S

Telephone

DAvis 5-4172

NEW ADDRESS

14439 SO. AVALON BLVD.

GARDENA, CALIFORNIA

DESCRIPTION

Sold To

ITEM NO.

PART NO.

•The Ramo-Wooldridge Corp. 8820 Bellanca Ave.

·Los Angeles 45, Calif.

No

7972

Date Oct. 5, 1955

Customer's Order No. 10014

Job No. MRA 3181

TERMS:

UNIT PRICE

Net 30

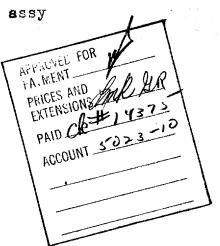
1 50604003 24 only card holder assy

QUANTITY

3.35

80.40 ~

AMOUNT



ORIGINAL

Sanitized - Approved For Halling: REROLD 64-00360 R000 1000 000 000 55 DATE 9-20-55 P. Q. NO 25-10014 (Red 11880) SHIPPER. FREIGHT BILL NO. NO OF CONTAINERS. PACKING SLIP NO. 02007 QUANTITY PART NO. DESCRIPTION ITEM NET 50604003 Card assembly Holder 24 Includes =

mgo. 1023-J STATINTL

STATINTI

**ACCOUNTING COPY** 

50604004, 50604005, 50604006, 50604007.

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STATINTL

STATINTL

GROSS